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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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Raymond Anthony Joao

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EXAMINER

GILLIGAN, CHRISTOPHER L

ART UNIT

PAPER NUMBER

3626

MAIL DATE

DELIVERY MODE

01/24/2008

PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Summary

Application No.

09/737,348

Applicant(s)

JOAO, RAYMOND ANTHONY

Examiner

C. LUKE GILLIGAN

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-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 25 October 2007.
- 2a) ☐ This action is **FINAL**. 2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 21-32, 34, 35 and 41-46 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 21-32, 34, 35 and 41-46 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on _____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
- ☐ Certified copies of the priority documents have been received.
 - ☐ Certified copies of the priority documents have been received in Application No. _____.
 - ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).
- * See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- | | |
|---|---|
| 1) <input checked="" type="checkbox"/> Notice of References Cited (PTO-892) | 4) <input type="checkbox"/> Interview Summary (PTO-413)
Paper No(s)/Mail Date. _____ |
| 2) <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948) | 5) <input type="checkbox"/> Notice of Informal Patent Application |
| 3) <input checked="" type="checkbox"/> Information Disclosure Statement(s) (PTO/SB/08)
Paper No(s)/Mail Date <u>10/25/07</u> . | 6) <input type="checkbox"/> Other: _____ |

Continued Examination Under 37 CFR 1.114

1. A request for continued examination under 37 CFR 1.114, including the fee set forth in 37 CFR 1.17(e), was filed in this application after final rejection. Since this application is eligible for continued examination under 37 CFR 1.114, and the fee set forth in 37 CFR 1.17(e) has been timely paid, the finality of the previous Office action has been withdrawn pursuant to 37 CFR 1.114. Applicant's submission filed on 10/25/07 has been entered.

Response to Amendment

2. In the amendment filed 10/25/07, the following has occurred: claims 21-24, 29, 31, 32, 34, 35, and 45 have been amended and claim 46 has been added. Now, claims 21-32, 34, 35 and 41-46 are presented for examination.

Claim Rejections - 35 USC § 103

3. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

4. Claims 21-22, 24, 26-27, and 29-35 are rejected under 35 U.S.C. 103(a) as being unpatentable over Boyer et al., U.S. Patent No. 6,208,973 in view of Watson, The doctor is in!.

5. As per claim 21, Boyer teaches an apparatus, comprising: a receiver, wherein the receiver receives information regarding an individual, wherein the information regarding an individual is transmitted from a first computer or from a first communication device, wherein the first computer or the first communication device is associated with or used by a healthcare provider and, wherein the information regarding an individual is transmitted via, on, or over, at

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least one of the Internet and the World Wide Web, wherein the information regarding an individual contains information regarding at least one of a symptom, an examination finding, diagnosis, a treatment, an administration of a treatment, and a procedure (see column 13, lines 18-24 and Figure 1); a database or memory device, wherein the database or the memory device is associated with the receiver and is located at a location remote from the first computer or the first communication device, wherein the database or the memory device stores information regarding a plurality of individuals, a plurality of healthcare providers, and a plurality of healthcare insurers or healthcare payers, and further wherein the information regarding a plurality of individuals, a plurality of healthcare providers, and a plurality of healthcare payers, includes a healthcare record or a healthcare history for or associated with each individual of a plurality of individuals, including a healthcare record or a healthcare history for or associated with the individual, information regarding a healthcare practice of, and an insurance accepted by, each of the plurality of healthcare providers, including information regarding a healthcare practice of, and an insurance accepted by, the healthcare provider, information for processing information regarding a healthcare diagnosis and a healthcare treatment, and information for submitting an insurance claim to a healthcare insurer or a healthcare payer associated with the individual (see Figures 2a and 2b and column 8, line 27 – column 9, line 35); a processing device, wherein the processing device processes the information regarding an individual, and further wherein the processing device at least one of stores the information regarding an individual in the database or the memory device and updates a healthcare record or a healthcare history associated with the individual (see column 8, lines 56-67), and further wherein the processing device automatically generates an insurance claim (see column 13, lines 25-30).

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6. Boyer does not explicitly teach the insurance claim being generated based on the information regarding the individual received by the receiver, information regarding the healthcare provider, and information regarding a healthcare insurer or healthcare payer associated with the individual.

7. Watson discloses receiving a information regarding an individual at a processor and generating at the processor (i.e. clearinghouse) an insurance claim (i.e. the customized claim) suitable for being automatically submitted to an associated healthcare insurer (see first paragraph of page 2). Watson further teaches that the processor (clearinghouse) delivers the generated claim (customized claim) to the insurer (see first paragraph of page 2). It would have been obvious to one of ordinary skill in the art at the time of the invention to incorporate such an architecture into the system of Boyer. One of ordinary skill in the art would have been motivated to incorporate such a feature of the purpose of alleviating certain claims processing duties from healthcare practices (see abstract of Watson).

8. As per claim 22, Boyer in view of Watson teaches the apparatus of claim 21 as described above. Boyer further teaches the processing device processes information regarding a symptom or an examination finding regarding the individual, and further wherein the processing device generates a diagnostic report containing information regarding a diagnosis or a list of possible diagnoses (see column 13, lines 42-49).

9. As per claim 24, Boyer in view of Watson teaches the apparatus of claim 22 as described above. Boyer further teaches the processing device generates a treatment report containing information regarding a treatment for the diagnosis or each diagnosis in the list of possible diagnoses (see column 13, lines 42-49).

10. As per claim 26, Boyer in view of Watson teaches the apparatus of claim 21 as described above. Boyer further teaches the processing device processes information regarding

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at least one of a treatment associated with the diagnosis and a procedure associated with the diagnosis (see column 8, lines 56-67).

11. As per claim 27, Boyer in view of Watson teaches the apparatus of claim 22 as described above. Boyer further teaches the diagnostic report contains information regarding at least one of a misdiagnosis, a treatment success, and a treatment failure (see column 8, lines 56-67, the Examiner considers information regarding past patient treatments, as disclosed by Boyer, to encompass at least information regarding a treatment success).

12. As per claim 29, Boyer in view of Watson teaches the apparatus of claim 21 as described above. Boyer further teaches the processing device processes information regarding at least one of a treatment to be administered to the individual and a procedure to be performed on the individual, and further wherein the processing device determines whether the at least one of a treatment to be administered to the individual and a procedure to be performed on the individual is correct or incorrect (see column 13, lines 42-49, the Examiner considers the degree to which a treatment is covered under a patient's profile to be an indication of whether the treatment is correct or incorrect), wherein the processing device generates a treatment response message containing information regarding whether the at least one of a treatment to be administered to the individual and a procedure to be performed on the individual is correct or incorrect, wherein the apparatus transmits the treatment response message to at least one of a computer and a communication device associated with a healthcare provider or healthcare facility (see column 13, lines 42-49).

13. As per claim 30, Boyer in view of Watson teaches the apparatus of claim 29 as described above. Boyer further teaches the treatment response message contains information regarding at least one of a treatment, a procedure, treatment instructions, procedure instructions, treatment steps, and procedure steps (see column 13, lines 42-49).

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14. As per claim 31, Boyer in view of Watson teaches the apparatus of claim 21 as described above. Boyer further teaches the insurance claim contains information obtained with at least one of the listed devices (see Figure 6, it is noted that various items, such as "COLLECT VENOUS BLOOD," RHYTH ECG, TRACE," etc. require such devices).

15. As per claim 32, Boyer in view of Watson teaches the apparatus of claim 21 as described above. Boyer further teaches the information regarding the individual is transmitted to the processing device on or over at least one of the Internet and the World Wide Web (see column 12, lines 49-56).

16. As per claim 33, Boyer in view of Watson teaches the apparatus of claim 21 as described above. Boyer further teaches a database, wherein the database contains healthcare records or medical histories associated with a plurality of individuals (see column 8, lines 56-67).

17. As per claim 34, Boyer in view of Watson teaches the apparatus of claim 21 as described above, wherein the processing device processes information for scheduling an appointment with a healthcare provider (see column 12, lines 6-19).

18. As per claim 35, Boyer in view of Watson teaches the apparatus of claim 21 as described above. Boyer further teaches the apparatus detects an occurrence of an event for which a healthcare provider is to be notified, wherein the processing device generates a notification message, and further wherein the apparatus transmits the notification message to a computer or a communication device associated with the healthcare provider in real-time (see column 13, lines 18-28, the healthcare provider is notified of the patient's coverage profile).

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19. Claims 23 and 25 are rejected under 35 U.S.C. 103(a) as being unpatentable over Boyer et al., U.S. Patent No. 6,208,973 in view of Watson, The doctor is in! and further in view of Rosenfeld et al., U.S. Patent No. 6,804,656.

20. As per claim 23, Boyer in view of Watson teaches the apparatus of claim 22 as described above. Boyer does not explicitly teach the diagnostic report contains information regarding at least one of a probability of occurrence and statistical information regarding the diagnosis or each diagnosis in the list of possible diagnoses. However, Rosenfeld teaches an apparatus that derives a probability of occurrence with respect to possible diagnoses (see column 43, lines 11-27). It would have been obvious to one of ordinary skill in the art at the time of the invention to incorporate such a feature into the apparatus of Boyer. One of ordinary skill in the art would have been motivated to incorporate such a feature for the purpose of providing a high level of standardized care (see column 4, lines 28-29 of Rosenfeld).

21. As per claim 25, Boyer in view of Watson teaches the apparatus of claim 24 as described above. Boyer does not explicitly teach generating a treatment report in conjunction with information regarding a drug interaction and a treatment interaction. However, Rosenfeld teaches generating a treatment report in conjunction with information regarding a drug interaction and a treatment interaction (see column 23, line 57 – column 24, line 11). It would have been obvious to one of ordinary skill in the art at the time of the invention to incorporate such a feature into the apparatus of Boyer. One of ordinary skill in the art would have been motivated to incorporate such a feature for the purpose of reducing the occurrence of adverse events (see column 4, lines 26-27 of Rosenfeld).

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22. Claim 28 is rejected under 35 U.S.C. 103(a) as being unpatentable over Boyer et al., U.S. Patent No. 6,208,973 in view of Watson, The doctor is in! and further in view of Sun et al., U.S. Patent No. 6,273,856.

23. As per claim 28, Boyer in view of Watson teaches the apparatus of claim 24 as described above. Boyer does not explicitly teach the treatment report contains information regarding at least one of an herbal remedy or treatment, a self-healing remedy or treatment, and an exercise remedy or treatment. However, Sun teaches a treatment report containing at least an exercise remedy or treatment (see column 6, lines 23-33). It would have been obvious to one of ordinary skill in the art at the time of the invention to incorporate such a feature into the apparatus of Boyer. One of ordinary skill in the art would have been motivated to incorporate such a feature for the purpose of providing enhanced care to patients with pacemakers (see column 1, lines 48-53 of Sun).

24. Claims 41-45 are rejected under 35 U.S.C. 103(a) as being unpatentable over Boyer et al., U.S. Patent No. 6,208,973 in view of Watson, The doctor is in! and further in view of DiRienzo et al., U.S. Patent No. 6,076,066.

25. As per claims 41-45, Boyer in view of Watson teaches the apparatus of claim 21. Boyer does not explicitly teach that information regarding an individual contains a digital x-ray file, a digital MRI file, a digital CAT scan file, video information or image, and audio information and an image. However, DiRienzo teaches a system for automated insurance claims processing that includes the feature of attaching information regarding an individual to insurance claims that includes a digital x-ray file, a digital MRI file, a digital CAT scan file, video information or image, and audio information and an image (see column 11, lines 13-30). It would have been obvious to one of ordinary skill in the art at the time of the invention to incorporate such a feature into the

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apparatus of Boyer. One of ordinary skill in the art would have been motivated to incorporate such a feature for the purpose of further reducing the need for hard copy attachments in conjunction with the electronic filing of insurance claims (see column 7, line 59 – column 8, line 3 of DiRienzo).

Response to Arguments

26. Applicant's arguments with respect to claim 21-32, 34, 35 and 41-46 have been considered but are moot in view of the new ground(s) of rejection.

Conclusion

27. The prior art made of record and not relied upon is considered pertinent to applicant's disclosure.

- Business Wire, EDIComm Unveils All-Payer Solution for Healthcare EDI Transactions

28. Any inquiry concerning this communication or earlier communications from the examiner should be directed to C. LUKE GILLIGAN whose telephone number is (571)272-6770. The examiner can normally be reached on Monday-Friday 8:30am-6:00pm.

29. If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Joseph Thomas can be reached on (571) 272-6776. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

30. Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications

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may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

1/18/08

/C. LUKE GILLIGAN/
Primary Examiner, Art Unit 3626